

OAHU CANDIDATES-
SUBMIT 1 ORIGINAL AND 1 COPY
NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

DENNIS A. ARAKAKI

(b) Committee Name:

Friends for Dennis Arakaki

(c) Mailing Address:

3046 Uaawa Place

Honolulu, HI 96813

(d) Phone (Bus)

836-3536

(Res)

841-4191

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

- ☐ 1st Preliminary Primary ☐ Amended ☐ First ☐ Third
☒ 2nd Preliminary Primary ☐ Short Form ☐ Second ☐ Fourth
☐ Final Primary
☐ Preliminary General
☐ Final Election Period
☐ Supplemental

REPORTING PERIOD

July 1 through Sept. 6, 2002

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section IV on the Back of this Form Before Completing This Section)

| | COLUMN A TOTAL THIS PERIOD | COLUMN B ELECTION PERIOD ² TOTAL TO DATE |
|-------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------|
| 1. Cash on Hand at the Beginning of the Election Period ² | | \$ 2,922.56 |
| 2. Cash on Hand at the Beginning of this Reporting Period..... | \$ 18,694.54 | |
| 3. Total Receipts (From Line 15)..... | 1,100.00 | 38,986.61 |
| 4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)..... | 19,794.54 | 41,909.17 |
| 5. Total Disbursements (not including Unpaid Expenditures) (From Line 19)..... | 8,345.59 | 34,872.10 |
| 6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4).... | 11,448.95 | 7,037.07 |
| 7. Total Loans at the Closing of this Reporting Period..... | 3,940.00 | |
| 8. Total Unpaid Expenditures at the Closing of this Reporting Period..... | -0- | |
| 9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8)..... | -0- | |
| 10. Surplus/Deficit (Subtract Line 9 from Line 6)..... | \$ 7,508.95 | |

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.



Candidate Signature

9-11-02

Date



Treasurer Signature

9-11-02

Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.

² An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

| RECEIPTS | COLUMN A TOTAL THIS PERIOD | COLUMN B ELECTION PERIOD TOTAL TO DATE | |
|--------------------------------------------------------------------------|-------------------------------|----------------------------------------------|------------|
| 11. Contributions From: | | | 11 |
| (a) Individuals/Other Entities/Noncandidate Committees/Political Parties | | | 11(a) |
| (ii) Monetary and Non-Monetary Contributions of \$100 or Less..... | \$ 800.00 | \$29,151.61 | 11(a)(i) |
| (iii) Monetary and Non-Monetary Contributions of More Than \$100..... | 300.00 | 9,835.00 | 11(a)(ii) |
| (iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii))..... | 1,100.00 | 38,986.61 | 11(a)(iii) |
| (b) Candidate or Candidate's Immediate Family | | | 11(b) |
| (ii) Monetary and Non-Monetary Contributions of \$100 or Less..... | -0- | -0- | 11(b)(i) |
| (iii) Monetary and Non-Monetary Contributions of More Than \$100..... | -0- | -0- | 11(b)(ii) |
| (iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii))..... | -0- | -0- | 11(b)(iii) |
| 12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii))..... | 1,100.00 | 38,986.61 | 12 |
| 13. Public Funds and Other Receipts..... | -0- | -0- | 13 |
| 14. Loans..... | -0- | 4,440.00 | 14 |
| 15. Total Receipts (Add Lines 12 through 14)..... | 1,100.00 | 43,428.61 | 15 |
| DISBURSEMENTS | | | |
| 16. Expenditures..... | 7,845.59 | 34,372.10 | 16 |
| 17. Loans Repaid or Forgiven..... | 500.00 | 500.00 | 17 |
| 18. Unpaid Expenditures Paid or Forgiven..... | -0- | -0- | 18 |
| 19. Subtotal Disbursements (Add Lines 16 through 18)..... | 8,345.59 | 34,872.10 | 19 |
| 20. Unpaid Expenditures..... | -0- | | 20 |
| 21. Total Disbursements (Add Lines 19 and 20)..... | \$ 8,345.59 | \$34,872.10 | 21 |

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

- ☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES
☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

FRIENDS OF DENNIS ARAKAKI

| DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR | FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER | AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD | AGGREGATE ELECTION PERIOD TOTAL TO DATE |
|---------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------|
| | IF A DEPENDENT MINOR, ENTER NAME OF PARENT | OCCUPATION | | |
| 7-24-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Dr. Robin Welch 615 Pi'ikoi St., Suite 1603 Honolulu 96814 | Psychologist | \$ 300.00 | \$ 800.00 |
| 7-24-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Cumulative total of contributions of less than \$100 | | 800.00 | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | | |

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

\$1100.00

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

\$1100.00

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 6

FRIENDS OF DENNIS ARAKAKI

| DATE OF EXPENDITURE | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION | PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION | AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD |
|---------------------|--------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 7-2-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Postmaster Kapalama Station | First class and 3 cent stamps for fundraiser thank you letter | \$ 114.00 |
| 7-3-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION MY Printers 2826 Kaihikapu Street Honolulu 96819 | Mailing services for district newsletter | 1408.79 |
| 7-3-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Clock and Trophy Shop 214-A Sand Island Access Road Honolulu 96819 | Donation trophy for Sister State-Province goodwill mission | 130.00 |
| 7-9-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION The Foot Print Company 949 McCully Street Honolulu 96826 | Imprinted pens and pencils | 1781.74 |
| 7-9-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION 'Aikane Buttons and Ribbons 720 Iwilei Road #305 Honolulu 96817 | Donate custom printed ribbon awards for "Kids in Sports" | 135.00 |
| 7-9-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Clock and Trophy Shop | Donate plaque for HI-Okinawa goodwill mission | 120.00 |
| 7-15-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Office Depot 1505 Dillingham Blvd. Honolulu 96817 | Ink for campaign printer | 55.57 |

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....

\$3745.10

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 6

FRIENDS OF DENNIS ARAKAKI

| DATE OF EXPENDITURE | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION | PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION | AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 7-18-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION HI United Okinawan Association Softball League 91-110 Mikohu Street 'Ewa Beach 96706 | Donate trophy to softball league | \$ 25.00 |
| 7-18-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Clock and Trophy Shop | Donate trophies for Outstanding male and female athletes | 32.00 |
| 7-18-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Friends of Isaac Hokama 1212 Nu'uanu Avenue #2509 Honolulu 96817 | Two fundraiser tickets | 50.00 |
| 7-19-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Cash First National Bank Campaign Account | Filing fee paid to Office of Elections | 250.00 |
| 7-24-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Kamehameha Bakery School Street Honolulu 96817 | Sheet cakes donated to summer fun programs at Kalihi Uka and Beretania Centers | 62.40 |
| 7-25-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION MY Printers | Production of walking piece | 453.12 |
| 7-25-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Voter Contact Services P.O. Box 25274 Honolulu 96825 | Walking cards | 181.80 |

| | |
|---------------------------------------------------------------------------------------------------------------------|-----------|
| 1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... | \$1054.32 |
| 2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)..... | |

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 3 OF 6

FRIENDS OF DENNIS ARAKAKI

| DATE OF EXPENDITURE | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION | PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION | AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD |
|---------------------|------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 7-25-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Romy Cachola Councilmember | Reimbursement for composite ad placed in FCCH directory | \$ 62.50 |
| 7-25-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Voter Contact Services | Mailing labels for district newsletter | 60.00 |
| 7-26-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Oceanic Cable 200 Akamainui Street Mililani 96789 | ISP provider fee | 42.95 |
| 7-31-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION American T-shirt Company 1217 North King Street Honolulu 96817 | Campaign committee shirts | 366.08 |
| 8-1-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION American T-shirt Company | Balance of payment for campaign shirts | 35.10 |
| 8-2-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION The Monogram Shop, LLC 1007 Dillingham Blvd. #214 Honolulu 96817 | Monogram for campaign shirts | 208.12 |
| 8-7-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION The Honolulu Shirt Shop 944 Akepo Lane Honolulu 96819 | Donation "Kids in Sports" softball teams | 193.59 |

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... \$ 968.34

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 4 OF 6

FRIENDS OF DENNIS ARAKAKI

| DATE OF EXPENDITURE | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION | PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION | AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD |
|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 8-7-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION O'ahu Democratic County Committee Gary Tasaka 3075 Ala Poha Place #1503 Honolulu 96818 | Regional candidates forum donation for refreshments and facility rental | \$ 25.00 |
| 8-8-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Catholic Charities Lanakila Senior Center 2745 Pali Hwy. Honolulu 96817 | Meet the Candidates forum donation for refreshments | 25.00 |
| 8-9-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Longs Kamehameha Shopping Center Honolulu 96819 | Purchase memory card for digital camera | 70.56 |
| 8-12-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Na Loio Public Interest Law Firm 810 North Vineyard Blvd. Honolulu 96817 | Purchase ad for commemorative booklet | 100.00 |
| 8-16-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Cash Hawaii National Bank | Graduation honoraria for volunteers | 100.00 |
| 8-16-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Star Travel Kamehameha Shopping Center Honolulu 96819 | Coupon door prize for fundraiser | 130.00 |
| 8-20-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Oceanic Cable | ISP provider fee | 42.95 |

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... \$ 493.51

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 5 OF 6

FRIENDS OF DENNIS ARAKAKI

| DATE OF EXPENDITURE | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION | PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION | AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 8-20-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Hawaii Hochi Ltd. 917 Kokea Street Honolulu 96817 | Cost for printing district newsletter | \$ 774.96 |
| 8-22-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Hawaii Filipino Democrats C/o P.O. Box 344 Kahuku 96731 | Ticket to reception kick-off | 25.00 |
| 8-22-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION PRO-LAB C/o George Kodama State Capitol, Room 417 Honolulu 96813 | Gift re-prints of photos of Sister State-Province signing ceremony | 38.00 |
| 8-26-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION O'ahu Filipino Community Council P.O. Box 17531 Honolulu 96817 | Program ad for installation dinner | 110.00 |
| 8-27-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Promotions in Paradise 754 Ilaniwai Street Honolulu 96813 | Production of bumper stickers | 290.33 |
| 9-4-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Akyth's P.O. Box 735 Honolulu 96808 | Meeting refreshments for CAN | 126.36 |
| 9-4-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Filipino Chamber of Commerce 905 Umi Street Suite 306 Honolulu 96819 | Scholarship fundraiser donation | 70.00 |

| | |
|---------------------------------------------------------------------------------------------------------------------|-----------|
| 1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... | \$1434.32 |
| 2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)..... | |

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 6 OF 6

FRIENDS OF DENNIS ARAKAKI

| DATE OF EXPENDITURE | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION | PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION | AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD |
|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 9-4-02 | <input type="checkbox"/> NON-MONETARY CONTRIBUTION Hawaii Firefighters Association 2305 South Beretania Street #202 Honolulu 96826 | Cost of ad in souvenir program | \$ 150.00 |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | |
| | <input type="checkbox"/> NON-MONETARY CONTRIBUTION | | |

| | |
|---------------------------------------------------------------------------------------------------------------------|-----------|
| 1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... | \$ 150.00 |
| 2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)..... | 7845.59 |

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE C
PUBLIC FUNDS AND OTHER RECEIPTS
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

FRIENDS OF DENNIS ARAKAKI

| DATE OF DEPOSIT | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF SOURCE OF PUBLIC FUNDS OR OTHER RECEIPT | DESCRIPTION OF OTHER RECEIPT | AMOUNT OF PUBLIC FUNDS OR OTHER RECEIPT THIS PERIOD | AGGREGATE ELECTION PERIOD TOTAL TO DATE |
|-----------------------|---------------------------------------------------------------------------------------------------|------------------------------|-----------------------------------------------------------|-----------------------------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

1. SUBTOTAL OF PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (This Page).....

-0-

2. TOTAL PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (Last Page Only) (Transfer total to Line Number
13 of the Disclosure Report).....

-0-

ATTACH A COPY OF THE
EXECUTED LOAN DOCUMENT AT
THE TIME OF INITIAL DISCLOSURE

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE D
LOANS
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

FRIENDS OF DENNIS ARAKAKI

| LOAN SOURCE | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF LENDER NAME OF EMPLOYER AND OCCUPATION | AMOUNT OF LOAN AT BEGINNING OF THIS PERIOD | NEW LOAN AMOUNT THIS PERIOD | AMOUNT REPAID OR FORGIVEN THIS PERIOD | AMOUNT OF LOAN AT CLOSING OF THIS PERIOD |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-----------------------------------------------------|-----------------------------------|------------------------------------------------|---------------------------------------------------|
| DATE OF LOAN | PURPOSE OF LOAN | | | | |
| <input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER | To cover campaign expenses | \$4440.00 | -0- | <input type="checkbox"/> FORGIVEN \$ 500.00 | \$3940.00 |
| <input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER | | | | <input type="checkbox"/> FORGIVEN | |
| <input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER | | | | <input type="checkbox"/> FORGIVEN | |
| <input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER | | | | <input type="checkbox"/> FORGIVEN | |
| <input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER | | | | <input type="checkbox"/> FORGIVEN | |
| <input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER | | | | <input type="checkbox"/> FORGIVEN | |
| <input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER | | | | <input type="checkbox"/> FORGIVEN | |
| 1. SUBTOTAL (This Page)..... | | | -0- | | |
| 2. TOTAL NEW LOANS THIS PERIOD (Last Page Only) (Transfer total to Line Number 14 of the Disclosure Report)..... | | | | | |
| 3. TOTAL LOANS REPAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 17 of the Disclosure Report)..... | | | | \$ 500.00 | |
| 4. TOTAL LOANS AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 7 of the Disclosure Report).... | | | | | \$3940.00 |

Form CC-5(D) (Rev. 5/99)

If a loan is forgiven, the loan must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven loan does not have to be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE E
UNPAID EXPENDITURES
CANDIDATE COMMITTEE**

NOTE: EXPENDITURES ARE CONSIDERED MADE WHEN THE PRODUCT IS DELIVERED OR THE SERVICE IS RENDERED (ACCRAUAL METHOD OF ACCOUNTING).

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

FRIENDS OF DENNIS ARAKAKI

| DATE OF UNPAID EXPENDITURE | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR | AMOUNT OF UNPAID EXPENDITURE AT BEGINNING OF THIS PERIOD | NEW UNPAID EXPENDITURE AMOUNT THIS PERIOD | AMOUNT PAID OR FORGIVEN THIS PERIOD | AMOUNT OF UNPAID EXPENDITURE AT CLOSING OF THIS PERIOD |
|----------------------------|---------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------|-------------------------------------|--------------------------------------------------------|
| | PURPOSE OF UNPAID EXPENDITURE | | | | |
| | | | | <input type="checkbox"/> FORGIVEN | |
| | | | | <input type="checkbox"/> FORGIVEN | |
| | | | | <input type="checkbox"/> FORGIVEN | |
| | | | | <input type="checkbox"/> FORGIVEN | |
| | | | | <input type="checkbox"/> FORGIVEN | |

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|-----|
| 1. SUBTOTAL (This Page)..... | -0- | -0- | -0- |
| 2. TOTAL NEW UNPAID EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 20 of the Disclosure Report)..... | -0- | | |
| 3. TOTAL UNPAID EXPENDITURES PAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 18 of the Disclosure Report)..... | | -0- | |
| 4. TOTAL UNPAID EXPENDITURES AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 8 of the Disclosure Report)..... | | | -0- |

Form CC-5(B) (Rev. 5/99)

If an unpaid expenditure is forgiven, the unpaid expenditure must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven unpaid expenditure does not have to be reported as an "Expenditure" on Schedule B.